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Bib Data Sheet

CONFIRMATION NO. 1959

<b>SERIAL NUMBER</b> 10/811,210	<b>FILING OR 371(c) DATE</b> 03/26/2004 <b>RULE</b>	<b>CLASS</b> 399	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> 2003-0867.02
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
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**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 06/10/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ac</i>	<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 5
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Verified and Acknowledged  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
 21972 *29*

**TITLE**  
 Waste toner system for an image forming device

<b>FILING FEE RECEIVED</b> 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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